

**NORTHEASTERN OKLAHOMA  
A&M COLLEGE  
Application for Degree**

**PERSONAL DATA**

Print last name, first name, middle initial		CWID	Current Phone No.
Current Mailing Address (Street/P.O. Box)	City, State, Zip		Email address

**DIPLOMA INFORMATION**

Name to appear on diploma (Print first name first)

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Mailing address	City, State, Zip
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*\* Graduation fee must be paid before diploma is ordered*

**DEGREE APPLICATION**

Major	Advisor
Check type of degree applying for: <input type="checkbox"/> Associate of Arts <input type="checkbox"/> Associate of Science <input type="checkbox"/> Associate of Applied Science <input type="checkbox"/> One Year Certificate <input type="checkbox"/> Two Year Certificate	
Check anticipated completion date:	Year
<input type="checkbox"/> May <input type="checkbox"/> July <input type="checkbox"/> December	
Check your plans after graduation: <input type="checkbox"/> Transfer <input type="checkbox"/> Work <input type="checkbox"/> Other	If transfer, list college:  If other, explain:

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**APPROVAL**

We have checked this student's records and find the student to be a valid candidate for the degree requested.

Checked under 20    - 20    Catalog.

Advisor Signature	Date Approved
Dean Signature	Date Approved

**OFFICE USE ONLY**

Date application received:	Date of initial review:	Date of final review:	Date diploma mailed:
Degree Requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, list reason(s) not met.	
Course substitution received? <input type="checkbox"/> Yes <input type="checkbox"/> No		Substitution complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduation fee paid? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date added to account/ Date paid:	
Degree(s) Awarded:		Date degree(s) awarded:	